



July 11, 2017

The Honorable Michael Burgess
Chairman, Subcommittee on Health
House Committee on Energy & Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Debbie Dingell
116 Cannon House Office Building
Washington, DC 20515

The Honorable Patrick Tiberi
Chairman, Subcommittee on Health
House Committee on Ways & Means
1102 Longworth House Office Building
Washington, DC 20515

The Honorable Mike Thompson
231 Cannon House Office Building
Washington, DC 20515

Dear Chairmen Burgess and Tiberi, Representatives Dingell and Thompson:

Health IT Now, a broad-based coalition of patient groups, provider organizations, employers, and payers that supports incentives to deploy health information technology to improve quality, outcomes, and patient safety, and to lower costs, is writing in support of H.R. 3120. We appreciate your work to ensure electronic health records (EHRs) can be utilized to their fullest potential for providers and patients.

The Meaningful Use program has been successful in spurring adoption of EHRs - as of 2015, nearly nine in ten office-based physicians had adopted an electronic health record (EHR) compared to less than fifty percent in 2009.¹ Unfortunately, many providers and patients are frustrated by a lack of interoperability that not only threatens patient safety, it also increases health care costs. The reality is that taxpayers invested \$35 billion into EHRs that largely do not exchange information well.²

With this legislation, the Center for Medicare and Medicaid Services (CMS) will have the opportunity to transform the focus of Meaningful Use program from “check-the-box” activities to truly meaningful outcomes, including reaching widespread interoperability. In the *Medicare Access and CHIP Reauthorization Act (MACRA)*, Congress declared it a national objective to achieve widespread exchange of health information through interoperable certified EHR technology nationwide by December 31, 2018. If passed, CMS should fully use the flexibility provided by this legislation to hasten its work to reach this deadline and admirable goal.

¹ Office of the National Coordinator for Health Information Technology. 'Office-based Physician Electronic Health Record Adoption,' Health IT Quick-Stat #50. dashboard.healthit.gov/quickstats/pages/physician-ehr-adoption-trends.php. December 2016.

² United States of America, Department of Health and Human Services, Centers for Medicare and Medicaid Services. (2016, May). *EHR Incentive Program*. Retrieved July 10, 2017, from https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/May2016_SummaryReport.pdf

We appreciate your work on this issue and look forward to continuing to work together to pass H.R. 3120.

Sincerely,

A handwritten signature in black ink, appearing to read "Joel White". The signature is fluid and cursive, with the first name "Joel" being larger and more prominent than the last name "White".

Joel C. White
Executive Director